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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	60.130-1914;02MRA0232
	<b>First Named Inventor</b>	Emmanuel HUBER
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	10 / 684,966
	<b>Filing Date</b>	October 14, 2003
	<b>Group Art Unit</b>	2833
	<b>Examiner Name</b>	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD FOR LOCAL SECURITY LOCKING OF A VEHICLE DOOR**

(Title of the Invention)

the specification of which

☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **10/14/2003** as United States Application Number or PCT International  
Application Number **10/684,966** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
02 12 800	France	10/15/2002	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

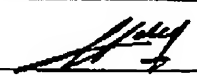
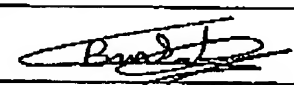
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**DECLARATION — Utility or Design Patent Application**

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		026096		OR <input type="checkbox"/> Correspondence address below	
Name Anna M. Shih					
Address 400 W. Maple Road					
Address Suite 350					
City Birmingham		State Michigan		ZIP 48009	
Country United States		Telephone (248) 988-8360		Fax (248) 988-8363	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR :			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Emmanuel			Family Name or Surname HUBER		
Inventor's Signature 			Date 29/01/2004		
Residence: City Olivet		State		Country France	
Mailing Address 144 rue des Chênes		State		Country France	
City Olivet		ZIP 45160		Country France	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Frédéric			Family Name or Surname BURKAT		
Inventor's Signature 			Date 02/02/2004		
Residence: City Bouey la Forêt		State		Country France	
Mailing Address 11 rue de la Petite Métairie		State		Country France	
City Bouzy La Foret		ZIP 45460		Country France	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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DECLARATION		REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)	
Name	Registration Number	Name	Registration Number
M. Lee Murrah	27,460		
Pete N. Kioussis	41,117		
Theodore W. Olds	33,080		
John E. Carlson	37,794		
David J. Gaskey	37,139		
Kerrie A. Laba	42,777		
William S. Gottschalk	44,130		
David L. Wisz	46,350		
Karin H. Butchko	45,864		
John M. Siragusa	46,174		
Anthony P. Cho	47,209		
Anna M. Shih	36,372		

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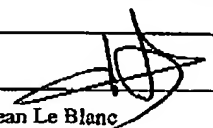
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jean-Marc		BELMOND	
Inventor's Signature 		Date <u>29/1/04</u>	
Residence: City	St Jean Le Blanc	State	Country France
Mailing Address		Citizenship France	
18 rue des Feuillantines			
Mailing Address			
City	St Jean Le Blanc	State	Country France
ZIP		45650	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	Country
ZIP			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address		Citizenship	
Mailing Address			
City		State	Country
ZIP			

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